

Vermont Department of Health
Checklist for Needlestick/Sharps Injuries

EMPLOYEE: _____ Date: _____

- ___ 1. Wash/flush injured area with soap and water thoroughly for several minutes
- ___ 2. Notify supervisor
- ___ 3. Get informed consent to draw specimen from source patient for immediate diagnostic testing (with Informed Consent—see Appendix 7):

Source patient information:

HIV status:	+	-	Unknown
HBV status:	+	-	Unknown
HCV status:	+	-	Unknown

- ___ HIV antibody (if status is unknown or hx of negative)
- ___ HBsAg (HBV antibody, if status is unknown or hx of negative)
- ___ HCV antibody (EIA or Elisa, if status is unknown or hx of negative)

Supervisor's assessment of relative risk of source patient if status not known by the patient.

- ___ **high risk**
- ___ **no known risk category**
- ___ **unknown/not determined**

- ___ 4. Obtain HBV vaccine/titer status from employee's records and record here:

Dates of 3-dose hepatitis B immunization series:

___/___/___, ___/___/___, ___/___/___

Date of hepatitis B titer: ___/___/___ Titer result: _____

Appropriate baseline blood specimens on the employee will be collected at the medical evaluation appointment.

- ___ 5. Contact local Emergency Department to notify them that a Health Department employee is coming in for evaluation of bloodborne pathogen exposure.
- ___ 6. **The injured employee should proceed promptly to local ED** for evaluation and treatment of the needle stick injury, testing, and possible HIV PEP (to be started within 1-2 hours of the incident, or as soon as possible thereafter).
- ___ 7. A follow-up appointment within 72 hours of the initial evaluation needs to be scheduled with the employee's primary provider and consultation with an HIV specialist at UVMHC or DHMC or directly with one of the HIV specialists is recommended to discuss evaluation and treatment needs.
- ___ 8. Follow CDC recommendations for post exposure testing.

Take a copy of this form to your medical evaluation on the day of the exposure.